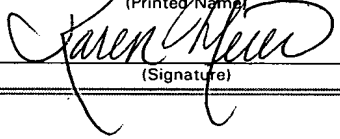




IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kemper et al.
Title: SYSTEM AND METHOD FOR
VERIFYING LOAN DATA AT
DELIVERY
Appl. No.: To be determined
Filing Date: To be determined
Examiner: To be determined
Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 979071898 US	12/16/03
(Express Mail Label Number)	(Date of Deposit)
Karen Meier (Printed Name)	
 (Signature)	

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

John L. Kemper
10513 Walter Thompson Drive
Vienna, Virginia 22181

David A. Coleman
10815 Glen Mist Lane
Fairfax, Virginia 22032

Enclosed are:

- [X] Application Data Sheet (37 CFR 1.76) (3 pages).
- [X] Specification, Claims, and Abstract (60 pages, plus cover sheet).
- [X] Formal drawings (7 sheets, Figures 1, 2, 3A, 3B, 4, 5, and 6).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00 =	\$770.00
Total Claims:	38	- 20	= 18	x \$18.00 =	\$324.00
Independents:	10	- 3	= 7	x \$86.00 =	\$602.00
If any Multiple Dependent Claim(s) present:			+	\$290.00 =	\$0.00
				SUBTOTAL: =	\$1696.00
[]				Small Entity Fees Apply (subtract ½ of above): =	\$0.00
				TOTAL FILING FEE: =	\$1,696.00

[X] Check No. 13398 in the amount of \$1,696.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 12/16/03

By Jean M. Tibbetts

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